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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

65

Application Number	09/981,278
Filing Date	10/16/2001
First Named Inventor	Wallace Matthews
Group Art Unit	
Examiner Name	Roberta Lucas

Attorney Docket Number

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	1	<input type="checkbox"/> Assignment Papers (for an Application)		<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached		<input checked="" type="checkbox"/> Drawing(s)	4	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	1	<input type="checkbox"/> Licensing-related Papers		<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final		<input type="checkbox"/> Petition		<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)		<input type="checkbox"/> Petition to Convert to a Provisional Application		<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request		<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address		<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request		<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Information Disclosure Statement		<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Certified Copy of Priority Document(s)		<input checked="" type="checkbox"/> CD, Number of CD(s) 1		
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	63	Remarks	application is complete but needs format changes to comply with prescribed format	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Wallace Matthews
Signature	Wallace Matthews
Date	August 13, 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

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Typed or printed name	Wallace Matthews
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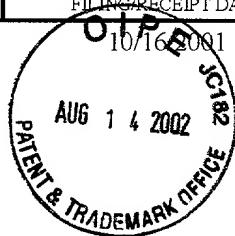


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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/981,278	10/16/2001	Wallace Matthews	

Wallace Matthews
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CONFIRMATION NO. 7205
FORMALITIES LETTER



OC000000008459905

Date Mailed: 07/16/2002

NOTICE TO FILE CORRECTED APPLICATION PAPERS

Filing Date Granted

This application has been accorded an Application Number and Filing Date. The application, however, is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given **TWO MONTHS** from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

The required item(s) identified below must be timely submitted to avoid abandonment:

- Abstract must be on a separate sheet.

*A copy of this notice **MUST** be returned with the reply.*

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